

42750-174

02/24/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
PREVENTION, PESTICIDES AND
TOXIC SUBSTANCES

Morris Gaskins
Registrations Manager
Albaugh, Inc.
P.O. Box 2127
Valdosta, GA 31604

FEB 24 2009

SUBJECT: Application for Pesticide Notification – Adding Advisory Statement and “KEEP
OUT OF REACH OF CHILDREN” Statement
Triclopyr BEE Technical
EPA Reg. No. 42750-174
~~Application Dated November 6, 2008~~

Dear Mr. Gaskins:

The Agency is in receipt of your Application for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 for the above product. The Registration Division (RD) has conducted a review of this request for its applicability under PRN 98-10 and finds that the action requested falls within the scope of PRN 98-10. The label submitted with the application has been date-stamped “Notification” and will be placed in our records.

If you have any questions, please call me directly at 703-305-6249 or Terri Stowe of my staff at 703-305-6117.

Sincerely,

A handwritten signature in black ink, appearing to be "Linda Arrington".

Linda Arrington
Notifications & Minor Formulations Team Leader
Registration Division (7505P)
Office of Pesticide Programs



United States
Environmental Protection Agency
Washington, DC 20460

 Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 42750-174	2. EPA Product Manager J. Tompkins	3. Proposed Classification <input type="checkbox"/> None <input checked="" type="checkbox"/> Restricted
4. Company/Product (Name) Triclopyr BEE Technical	PM# 25	
5. Name and Address of Applicant (Include ZIP Code) Albaugh, Inc. P.O. Box 2127 Valdosta, GA 31604 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i), my product is similar or identical in composition and labeling to: NOTIFICATION EPA Reg. No. _____ FEB 24 2009 Product Name _____	

Section - II

<input type="checkbox"/> Amendment - Explain below.	<input checked="" type="checkbox"/> Final printed labels in response to Agency letter dated 10/8/08
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input type="checkbox"/> "Me Too" Application.
<input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Notification of adding advisory statement per PR Notice 98-10 - Add KEEP OUT OF REACH OF CHILDREN statement

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no further changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under section 12 and 14 of FIFRA.

Section - III

1. Material This Product Will Be Packaged In:

Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Type of Container <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
* Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt No. per container

3. Location of Net Contents Information
 Label Container

4. Size(s) Retail Container
250 gal

5. Location of Label Directions
 Attached to container

6. Manner in Which Label is Affixed to Product
 Lithograph
 Paper glued
 Stenciled Other _____

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)

Name Morris Gaskins	Title Registrations Manager	Telephone No. (Include Area Code) 229-244-3288
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Certification
I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

6. Date Application Received (Stamped)

2. Signature 	3. Title Registrations Manager
4. Typed Name Morris Gaskins	5. Date November 6, 2008

